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## Update to Chapter 24 (EDI Support Requirements) of the *Medicare Claims Processing Manual* to Show New CMS Web Site URL References

### Provider Types Affected

Physicians, providers, and suppliers who submit claims for services to the Centers for Medicare & Medicaid Services (CMS) Medicare contractors (carriers, fiscal intermediaries (FIs), regional home health intermediaries (RHHIs), and durable medical equipment regional carriers (DMERCs))

### Background

This article, based on CR4398, highlights the fact that the <http://www.cms.hhs.gov> web site has been completely redesigned. Currently, Chapter 24 of the *Medicare Claims Processing Manual* contains URLs that no longer direct the user to the new CMS web site. If used, the following message will appear. *'We're sorry. The page you requested cannot be found. CMS has recently launched a web site redesign and many addresses have changed.'*

This instruction updates the URLs that are currently in Chapter 24, removes the URLs that no longer apply, and replaces them with the new URLs.

### Key Points

The key new web addresses are as follows:

- [http://www.cms.hhs.gov/ElectronicBillingEDITrans/01\\_Overview.asp](http://www.cms.hhs.gov/ElectronicBillingEDITrans/01_Overview.asp) is the new address for accessing and downloading the CMS EDI instructions.
- The X12N 837 implementation guide (IG) version 4010A1 for Institutional (I) and Professional (P) claims is now at [http://www.cms.hhs.gov/ElectronicBillingEDITrans/08\\_HealthCareClaims.asp](http://www.cms.hhs.gov/ElectronicBillingEDITrans/08_HealthCareClaims.asp) on the CMS web site.

#### Disclaimer

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- The implementation guide for coordination of benefits (COB) with other payers is at [http://www.cms.hhs.gov/ElectronicBillingEDITrans/12\\_COB.asp](http://www.cms.hhs.gov/ElectronicBillingEDITrans/12_COB.asp) on the CMS web site.
- The NCPDP Telecommunications Standard Specifications and IG version 5.1 and Batch Standard 1.1 for retail prescription drug claims (Billed to Medicare DMERCs only) and COB are at [http://www.cms.hhs.gov/ElectronicBillingEDITrans/08\\_HealthCareClaims.asp](http://www.cms.hhs.gov/ElectronicBillingEDITrans/08_HealthCareClaims.asp) on the CMS web site.
- The X12 835 IG version 4010A1 for Remittance Advice is at [http://www.cms.hhs.gov/ElectronicBillingEDITrans/11\\_Remittance.asp](http://www.cms.hhs.gov/ElectronicBillingEDITrans/11_Remittance.asp) on the CMS web site.
- The X12 276/277 IG version 4010A1 for Claim Status Inquiry and Response is located at [http://www.cms.hhs.gov/ElectronicBillingEDITrans/10\\_ClaimStatus.asp](http://www.cms.hhs.gov/ElectronicBillingEDITrans/10_ClaimStatus.asp) on the CMS web site.
- Information on the X12 270/271 IG version 4010A1 transactions for Beneficiary Eligibility Inquiry and response are at [http://www.cms.hhs.gov/ElectronicBillingEDITrans/09\\_Eligibility.asp](http://www.cms.hhs.gov/ElectronicBillingEDITrans/09_Eligibility.asp) on the CMS web site.
- HIPAA IG “companion documents” are available at <http://www.cms.hhs.gov/ElectronicBillingEDITrans> on the CMS web site. Once at that site, select the specific transaction desired from the left side of the screen and you will then get a link to the companion document at the bottom of the page for that transaction.

## Additional Information

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The official instructions issued to your carrier or intermediary regarding this change can be found at <http://www.cms.hhs.gov/Transmittals/downloads/R900CP.pdf> on the CMS web site.

If you have questions, please contact your Medicare FI/RHHI or carrier/DMERC at their toll-free number, which may be found at <http://www.cms.hhs.gov/apps/contacts/> on the CMS web site.

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